

APR 18 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

AMENDMENT TRANSMITTAL FORM

<p>Application Number</p> <p>Application Title</p> <p>Filing Date</p> <p>First Named Inventor</p> <p>Art Unit</p> <p>Examiner Name</p>	10/721,299
	FOOD PACKAGING CLOSURE APPARATUS
	11/24/2003
	Hall, William A.
	3721
Attorney Docket Number	54024-44719
<p>Total Number of Pages in This Submission</p> <p>13</p>	

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Determination Record Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> The Commissioner is hereby authorized to charge the fee of \$_____ in this application to a Deposit Account <u>20-0823</u> . <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-0823</u> . I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.	<input checked="" type="checkbox"/> Amendment & Response A <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declarations(s) <input type="checkbox"/> Extension of Time Request <input checked="" type="checkbox"/> If an extension or an additional extension of time is required, but is not enclosed, please consider this a conditional petition therefore and charge Deposit Account <u>20-0823</u> accordingly <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Petition <input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
--	---	--

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Thompson Coburn LLP		
Signature	<i>Joseph M. Rolnicki</i>		
Printed name	Joseph M. Rolnicki		
Date	April 15, 2005	Reg. No.	32,653

CERTIFICATE OF FIRST CLASS MAILING

I hereby certify that this document and fee is being deposited with the United States Postal Service as "First Class" under C.F.R. 1.8 on <u>April 15, 2005</u> , and addressed to: Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Signature	<i>Joseph M. Rolnicki</i>
Typed or printed name	Joseph M. Rolnicki

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.